

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

COLLINS, VELLA & CASELLO, LLC
2317 Highway 34, Suite 1A
Manasquan, NJ 08736
(732)751-1766
Joseph Casello, Esq.
Attorneys for the Debtor

In Re:

Carolyn E. Brown

Case No.: 20-20921

Chapter: 7

Adv. No.: _____

Hearing Date: _____

Judge: Gravelle

CERTIFICATION OF SERVICE

1. I, Courtney Parker :

☐ represent _____ in this matter.

☒ am the secretary/paralegal for Joseph M. Casello, who represents
_____ the Debtor _____ in this matter.

☐ am the _____ in this case and am representing myself.

2. On January 8, 2021, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.

1. Order Respecting Amendment to Schedule D, E/F, G or H or List of Creditors
2. Amendment to Schedule E/F
3. Notice of Commencement of Case

3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: 1/8/2021

Courtney Parker
Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Everyday Capital 116 Nassau Street Suite 804 New York NY 10038	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Lexus Financial Services P.O. Box 9490 Cedar Rapids IA 52409-9490	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Memorial Sloan Kettering 1275 York Avenue New York NY 10065	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Oxford c/o Rawlings Financial Services LLC PO Box 2020 La Grange KY 40031-2020	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)